National Council For Promotion of Urdu Language
Ministry of Human Resource Development
Department of Higher Education, Govt of India,
Farogh-E-Urdu Bhawan, FC 33/9, Jasola, New Delhi-110025
Web site   http://urducouncil.nic.in

DOEACC SOCIETY, CHANDIGARH CENTRE
(An Autonomous Scientific Society of Dept. of IT,
Ministry of Communication & IT)
SCO 114-116, Sector 17 B, Chandigarh 160017.
Web site   www.*doeaccchd.edu.in*

## Registration Form for Diploma in Computer Applications, Business Accounting and Multilingual DTP

(Please Tick '√' whichever is applicable, Write in capital Letters only and Leave one blank between Words)

| To be filled by NCPUL Centre After Verification of Eligibility Documents | Centre Code | Signature of Centre Head with Seal | Registration For  Session | | For DOEACC Use only |
|---|---|---|---|---|---|
| | | | Month 01 – Jan 07 - July | Year | Registration Number |

1. Name of Student   ( As in Matriculation Certificate) (In Block Letters)

| | | | | | | | | | | | | | | | | | |
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Space for Photograph. Do not Pin/Staple the Photo. Paste Photo properly.

Not to be attested

2. Father/Husband Name  (In Block Letters)

| | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |

3. Relation:  (Please specify the relation above)     FATHER | HUSBAND

4. Gender     MALE | FEMALE

Signature of Applicant

5. Category     SC | ST | OBC | GEN

6. Religion     MUSLIM | CHRISTIAN | SIKH | BUDDHIST | PARSI | HINDU | OTHER

7. Marital Status     SINGLE | MARRIED | WIDOW | WIDOWER | DIVORCE

8.  Educational qualification     10 PASS | 10+2 PASS **Please Attach attested Copy of Certificate**

9. Handicapped     YES | NO

10. Ex-Serviceman     YES | NO

11. Date of Birth (In Christian Era, DD/MM/YYYY  format)

12. Address of Applicant  (In Block Letters)  _____

_____

13. Email Address (if any)          _____

14. Contact Number (if any)          _____

I hereby Certify that, the information furnished above is true. I also undertake that I shall abide by the rules & regulations of NCPUL regarding this examination. I have not undergone this course from any other NCPUL Centre.

Date :

Place :                                                                                          Signature of Applicant